

**ORANGE COUNTY BAR ASSOCIATION
APPELLATE LAW SECTION
JANUARY MEETING**

Offering Specialization Credit for all Appellate Specialists

Date
Thursday, January 6, 2011

Time:
12:00 p.m. to 1:30 p.m.

Speaker:
Presiding Justice Judith McConnell
Fourth District, Division 1
Court of Appeal

Topic:
State of the Fourth District and Practicing in Division 1

- A discussion on the state of the Fourth District
- Practice tips, specific to appellate practice in San Diego Court of Appeal
- Question and answer

MCLE CREDIT = 1.00

This activity has been approved for MCLE credit by the State Bar of California in the amount of 1.0 hour(s), as appropriate to the content of the activity. OCBA is a State Bar of California approved MCLE provider and certifies that this activity conforms to the standards for approved education activities prescribed by the rules and regulations of the State Bar of California governing MCLE.

Place:
McCormick and Schmick's
2791 N. Main St., Santa Ana

	Advance Registration	After 1/3/2011
Section Member/Non Attorney Guest	\$30	\$40
Non-Section Member	\$55	\$65
Non-OCBA Attorney	\$65	\$75
No Meal – OCBA Attorney Section Member	-0-	\$10

Reservations will not be taken over the phone. Seating is Limited.

Persons with Disabilities: If special arrangements are required for attendance, please contact the OCBA no later than 7 days prior to the event.

If you make a reservation to attend this section meeting and are unable to attend, please notify the OCBA office in writing 3 business days prior to the meeting date or it will be necessary to bill you for the lunch reservation.

Orange County Bar Association reserves the right to substitute speakers.

Register online at www.OCBar.org

Appellate Law Section Meeting on January 6, 2011

I will attend with a meal. (Prices above)

I will attend - No Meal. (No Brown Bag Lunches Allowed)
(Non-Section Member \$25 / Non-OCBA Member \$35)

Name (*print*): _____ Email: _____

By providing your email address, you agree to allow the OCBA to email you regarding relevant OCBA information.

Firm Name: _____ Bar#: _____ Phone: _____

Business Address: _____ City/Zip: _____

Visa/Mastercard/Amex/Discover #: _____ Expiration Date: _____

Cardholder Name: _____ Signature: _____

Total enclosed/to be charged: _____ *Make checks payable to OCBA*